



## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

UTILITY PATENT APPLICATION TRANSMITTAL  
UNDER 37 CFR 1.53(b)21707 U.S. PTO  
10/607937

|                                    |                        |                  |
|------------------------------------|------------------------|------------------|
| Address to:                        | Attorney Docket No.    | SJO920000183US2  |
| Assistant Commissioner for Patents | Inventor(s)            | I. Kavosh et al. |
| Box Patent Application             | Express Mail Label No. | EL358844159US    |
| Washington, DC 20231               | Total Pages            | 39               |

Title of Application: **LASER TEXTURED MAGNETIC DISK**

## Transmitted with the patent application are the following:

22 Pages Specification, claims, abstract  
10 Pages Formal drawings  
2 Pages Declaration and Power of Attorney  
3 Pages Preliminary Amendment  
     Pages Information Disclosure Statement (IDS) (copies of citations not included in number of pages)  
X Return Receipt Postcard

If a continuing application, check appropriate box, and supply the requisite information below and in a preliminary amendment:

     Continuation X Divisional      Continuation-in-part (CIP) of prior application No.: 09/947,287  
Prior application information: Examiner: Louis V. Falasco Group /Art Unit: 1773

## Fee Calculation

|                          | Claims |       | Extra | Rate       | Fees     |
|--------------------------|--------|-------|-------|------------|----------|
| Basic Fee                |        |       |       |            | \$750.00 |
| Total Claims             | 7      | -20 = | 0     | x \$ 18.00 | \$0.00   |
| Independent Claims       | 1      | -3 =  | 0     | x \$ 84.00 | \$0.00   |
| Multiple Dependent Claim |        |       |       | \$0.00     |          |
|                          |        |       |       |            |          |
|                          |        |       |       | TOTAL      | \$750.00 |

- X Please charge my Deposit Account No. 50-2587 in the amount of \$750.00  
A duplicate copy of this sheet is attached.  
X The Commissioner is hereby authorized to charge payment of the following fees  
associated with this communication or credit any overpayment to Deposit  
Account 50-2587. A duplicate copy of this sheet is attached.  
X Any filing fees under 37 CFR 1.16 for the presentation of extra claims.  
X Any patent application processing fees under 37 CFR 1.17.

## EXPRESS MAIL CERTIFICATE

I hereby certify that the above paper/fee is being deposited with the  
United States Postal Service "Express Mail Post Office to Addressee"  
service under 37 CFR 1.10 on the date indicated below and is addressed  
to the Assistant Commissioner for Patents, Alexandria, VA 22313-1450.  
Date of Deposit: June 27, 2003

Person mailing paper/fee: Mary Lou DomeniciSignature [Signature]

Respectfully submitted,

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